Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OR SMALL ENTITY		
TOTAL CLAIMS			74		100141			RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NILIME	ER EXTRA		BASIC FEE			BASIC FEE		
					1	EN EATRA			303.00	OR		770.00	
TOTAL CHARGEABLE CLAIMS			minus 20= * 0					X\$ 9=	ļ	OR	X\$18=	108	
INDEPENDENT CLAIMS			minus 3 = * 3					X43=	I	OR	X86=	288	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						•	TOTAL		OR	TOTAL	1356		
CLAIMS AS AMENDED - PART II								OTHER THAN					
	·	(Column 1)	·	(Column	(Column 3)		SMALL		OR	SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE_	
NDM	Total	*	Minus	**		=		X\$ _. 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
L	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	LAIM			+145=		OR	+290=		
		L	TOTAL ADDIT. FEE			TOTAL	<u>.</u>						
	(Column 1) (Column 2) (Column 3)								<u> </u>	1	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING		HIGHES	ST :		Г		ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIOU PAID FO	SLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=		OR	X86=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						╽┟			On			
								+145=		OR	+290=		
		A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE							
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
\ME	Independent	*	Minus	***		=		X43=		o'R	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	id For IN THIS	S SPACE is le	ess than	20, enter "20."	A	TOTAL DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r four	nd in the app	ropriate box	in col	umn 1.		